

This form is subject to revision. Begin each new claim by checking for a new version of this form and downloading a new one if necessary.

If you have questions regarding the completion of this form, contact:

Gerry Clark by e-mail at [Gerald.E.CLARK@wrд.state.or.us](mailto:Gerald.E.CLARK@wrд.state.or.us) or by phone at 503-986-0811,

Or Jerry Gainey by e-mail at [Jerry.W.GAINEY@wrд.state.or.us](mailto:Jerry.W.GAINEY@wrд.state.or.us) or by phone at 503-986-0812.

The Department has a new program that allows a permit holder to pay the cost to have a private contractor review of the claim and, if appropriate, prepare a certificate. This new program means a certificate can be issued in about a month. The Department has a list of trained contractors that are selected on a rotating basis. For more information on this program see: <http://www.wrд.state.or.us/programs/index.shtml>.

\*\*This box can be deleted

**Oregon Water Resources Department**  
725 Summer St. NE, Suite A  
Salem, OR 97301-1271



## CLAIM OF BENEFICIAL USE

**A fee of \$150 must accompany this form to be accepted for permits with a priority date of July 9, 1987, or later. (ORS 536.050(1)(x))**

The completion of this form is required by OAR 690-014-0100(1) and 690-014-0110(4).

Please type or print in dark ink. If this form is found to contain errors or omissions, it may be returned to you. Every numbered item must have a response. If any requested information does not apply to the Claim, insert "n/a." Do not delete any section of this form unless directed by the form. The Department may require the submittal of additional information from any water user or authorized agent.

**A separate form shall be completed for each permit or transfer final order.**

### I. General Information

#### 1. File Information

Application Number (G, R, S or T)	Permit Number (if applicable)

#### 2. Property owner (current owner information)

##### a. Individuals

Name		
Mailing Address		
City/State/Zip		
Phone #		
Fax #		
e-mail address		

b. Businesses/Organizations

Name	
Contact Person and Title	
Mailing Address	
City/State/Zip	
Phone	
Fax	
e-mail	

If the current property owner is not the permittee or transfer holder of record, it is recommended that an assignment be filed with the Department. The COBU must be signed by the permit/transfer holder of record.

3. Permittee / Transferee of record (this may, or may not, be the current property owner)

a. Individuals

	Individual 1	Individual 2
Name		
Mailing Address		
City/State/Zip		

b. Businesses/Organizations

Name	
Contact Person and Title	
Mailing Address	
City/State/Zip	

4. Date of Site Inspection:

5. Person(s) interviewed and description of their association with the project:

Name	Date	Association with the project

6. County:

7. Tax Lot Information:

Tax map number	Tax lot number

8. If any property described in the place of use of the permit or transfer final order is excluded from this report, identify the owner of record for that property (ORS 537.230(4)):

\*\*Mark "NA" if there are no owners of property not included in this claim

Name	
Contact Person and Title	
Mailing Address	
City/State/Zip	
Phone #	

Name	
Contact Person and Title	
Mailing Address	
City/State/Zip	
Phone #	

## II. Points of Diversion/Appropriation and Place of Use

For each point of diversion or appropriation, provide the following information. If the claim is for more than one point of diversion/appropriation, copy and complete this section for each point of diversion or appropriation.

1. Provide a general narrative description of the distribution works. This description must trace the water system from the point of diversion or appropriation to and include the place of use:

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2. Point of diversion/appropriation name or number (correspond to map):

Point of diversion/appropriation name or number (correspond to map)	Well log ID # for all work performed on the well (if applicable)	Well tag # (if applicable)

Attach each well log available for the well (include the log for the original well and any subsequent alterations, reconstructions, and deepenings)

3. Point of diversion/appropriation source and, if from surface water, the tributary:

Source	Tributary to

4. Point of diversion/appropriation location:

(DLC, Government Lot, ¼ ¼, Section, Township, Range)	Reference to a recognized public land survey corner by distance and bearing or by coordinates

5. Developed use(s), period of use, and rate for each use:

Uses	If irrigation, list crop type	When water is used	Rate for use

**Total Quantity of Water** \_\_\_\_\_

6. Place of use being claimed for the point of diversion or appropriation:

DLC	Gov lot	1/4 1/4	Section	Township	Range	Use	# of primary acres	# of supplemental acres

**Total Acres Irrigated** \_\_\_\_\_

**Groundwater Source Information (Well and Sump)**

\*\*If the appropriation is not from ground water (well or sump), this section, items 1-5, can be deleted.

1. Describe the access port (type and location) or other means to measure the water level in the well in the box below:

2. If well logs are not available, provide as much of the following information as possible:

Casing Diameter	Casing Depth	Total Depth	Completion Date of Original Well	Completion Dates of Alterations	Who the well was drilled for	Well drilled by

In addition to the information requested in item “2” above, provide any other information which may help the Department locate any well logs associated with this appropriation.

\*\*If the appropriation is not from a sump, the following section, items 3-5, can be deleted. Construction standards for sumps can be found in OAR 690-210-0400.

3. If the appropriation involves a **SUMP**, provide the following information for each **SUMP**:

Length	Width	Average diameter	Maximum depth	Surface area (in acres)	Volume in cubic feet or acre feet

4. If the sump is curbed constructed with watertight surface curbing, describe the curbing in the table below:

Curbing material (concrete, concrete tiles, or steel)	If concrete, provide the thickness of the wall

5. Provide sump volume calculations in the box below:

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**Reservoir Data**

\*\*If this claim is not for a reservoir, or the system does not involve a reservoir as part of the distribution system, this section, items 1-7, can be deleted.

1. If the reservoir required the submittal of as-built plans and specifications, complete the table below:

Have the documents been submitted? yes or no	When were the documents submitted?	Have they been approved by the Department?	Number of acre feet stored

\*\*If as-builts were required, and have been submitted, items 2-7 can be deleted.

2. If the reservoir stores less than 9.2 acre-feet of water or if the dam is less than 10 feet in height, and as-built plans and specifications are not required, complete the table below and items 3-7.

Maximum depth	Average depth	Surface area (in acres)	Volume in acre feet

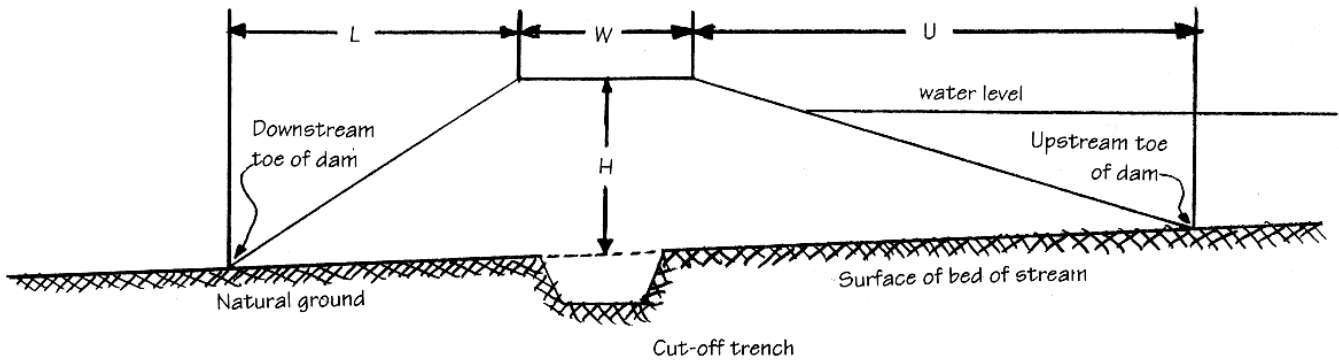
3. Provide reservoir volume calculations in the box below:

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4. Provide the following information concerning the physical characteristics of the dam:

Crest width (W)	Dam height at centerline (H)	Distance from downstream top of dam to downstream toe (L)	Distance from upstream top of dam to upstream toe (U)	Water level at inspection	Downstream slope	Upstream slope

Example Dam Profile \*\*This box can be deleted from the form



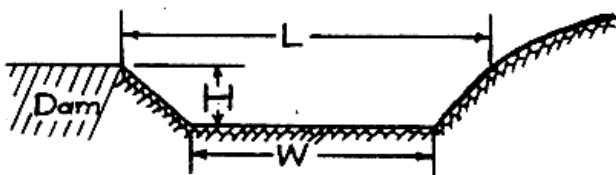
5. In the box below, provide a drawing showing the cross section of the dam at the maximum section indicating details and dimensions. The drawing should be drawn at a standard even scale.

6. Describe the outlet works (size and type of the outlet conduit and location) in the box below:

7. Describe the emergency spillway (dimensions and location) in the box below:

Spillway location	Bottom width (W)	Top width (L)	Spillway depth (H)

Spillway cross section at the spillway crest



**Storage tank data**

\*\*If this system does not include a storage tank as part of the distribution system, this section, item 1, can be deleted.

1. If the system involved a storage tank, complete the table below:

Material (concrete, fiberglass, metal, etc.)	Capacity in gallons	Above ground or buried

**Gravity flow pipe** (The Department typically uses the Hazen-William’s formula for a gravity flow pipe system)

\*\*If this claim does not rely on a gravity flow pipe to convey the water as part of the distribution system, this section, items 1-3, can be deleted.

1. If the system involves a gravity flow pipe, complete the table below.

Pipe size	Pipe type	“C” factor	Amount of fall	Length of pipe	Slope	Computed rate of water flow

2. Provide calculations in the box below:

3. If an actual measurement was taken, provide the following:

Date of Measurement	Who made the measurement	Measurement method	Measured quantity of water

Attach measurements notes

**Gravity flow canal or ditch** (The Department typically uses Manning’s formula for canals and ditches)

\*\*If this claim does not rely on a gravity flow canal or ditch to convey the water as part of the distribution system, this section, items 1-3, can be deleted.

1. If the system involves a gravity canal or ditch, complete the table below.

Canal or ditch type (material)	Top width of canal or ditch	Bottom width of canal or ditch	Depth	“N” factor	Amount of fall	Length of canal/ditch	Slope	Computed Volume

2. Provide calculations in the box below:

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3. If an actual measurement was taken, provide the following:

Date of Measurement	Who made the measurement	Measurement method	Measured quantity of water

Attach measurements notes

**System Information:**

Provide the following information concerning the diversion and delivery system. Trace the flow of water from the point of diversion/appropriation to the place of use.

1. Pump information

Brand	Model	Serial Number	Type (centrifugal, turbine or submersible)	Intake size	Discharge size

2. Motor information

Brand	Model	Horsepower	Max RPM	Voltage

3. Meter information

Required?	Make	Serial #	Condition (working or not)	Current meter reading	Notes

4. Measurement device description

Device description	Condition (working or not)	Notes

5. Measured pump capacity (using meter if meter was present and system was operating)

Initial meter reading	Ending meter reading	Duration of time observed	Total pump output

6. Theoretical pump capacity

Horsepower	Operating psi	Lift from source to pump *If a well, the water level during pumping (see pump test results)	Lift from pump to place of use	Total pump output



8. Mainline information

Mainline size	Length	Type of pipe	Buried or above ground

9. Lateral or handline information

Lateral or handline size	Length	Type of pipe	Buried or above ground

10. Sprinkler information      Make and model:

Make	Model	Size	Operating psi	Sprinkler output	Total number of sprinklers	Maximum number used	Total sprinkler output

Refer to the chart of sprinkler output at various pressures for most nozzle sizes attached to this document.

$$Q_{\text{sprinklers}} = \frac{(\text{max \# heads})(\text{gpm/head})}{448.8 \text{ gpm/cfs}} = \text{cfs}$$

11. **Additional notes or comments related to the system:**

### III. CONDITIONS

Please pay special attention to this section. All conditions contained in the permit or transfer final order shall be addressed. Reports that do not address all performance related conditions will be returned.

#### 1. Time Limits:

Permits or transfer Final Orders contain any or all of the following dates; the date when the actual construction work was to begin, the date when the construction was to be completed, and the date when the complete application of water to the proposed use is to be completed by. These dates may be referred to as ABC dates. Describe how the water user has complied with each of the development timelines established in the permit or transfer final order:

	Dates from permit or transfer final order	Date accomplished (must be within period between permit or transfer final order issuance and the date to completely apply water)	Description of actions taken by water user to comply with the time limits
Begin construction			
Complete construction			
Complete application of water			

#### 2. Initial Water Level Measurements:

\*\*If the Claim is for surface water or a reservoir, or if the water user was not required to submit static water level measurements, items b through e relating to this section can be deleted.

a. Was the water user required to submit an initial static water level measurement?      YES   NO   NA

b. What month was the initial measurement to be taken in?

c. Did an authorized individual (as stated in the permit or transfer final order) make the initial static water level measurement in the month required?  
 YES   NO

d. If "YES", was the measurement submitted to the Department?   YES   NO

e. If the initial measurement was not submitted, provide that measurement now, if available:

Date of measurement	Who made measurement	Method	Measurement

#### 3. Annual Static Water Level Measurements:

\*\*If the Claim is for surface water or a reservoir, or if the water user was not required to submit static water level measurements, items b through e relating to this section can be deleted.

a. Was the water user required to submit annual static water level measurements?      YES   NO   NA

b. In the box below, provide the month in which the static water level was to be made:

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c. Were the static water level measurements taken in the month required? YES   NO

d. If "YES", were those measurements submitted to the Department?   YES   NO

e. If the annual measurements were not submitted, provide the measurements now in the box below:

Year	Month	Measurement made by	Measurement

4. **Pump Test** (Required for ground water permits prior to issuance of a certificate)

a. Did the permit require the submittal of a pump test?      YES   NO

    \*\*If “NO”, items b through d relating to this section can be deleted

b. Has the pump test been previously submitted to the Department?      YES   NO

c. Has the pump test been approved by the Department?      YES   NO

d. If no, is the pump test attached to this Claim?      YES   NO

5. **Measurement, recording, and reporting conditions:**

a. Does the permit or transfer final order require the installation of a meter or approved measuring device?  
    YES   NO

**If a meter or approved measuring device was required, the COBU map must indicate the location of the device in relation to the point of diversion or appropriation.**

    \*\*If “NO”, items b through g relating to this section can be deleted.

b. Has a meter been installed?      YES   NO

c. Provide the date the meter was installed:

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d. If a meter has not been installed, has a suitable measuring device been installed and approved by the Department?      YES   NO

e. If “YES”, provide a copy of the letter approving the device, if available. If the letter is not available provide the name and title of the Water Resources Department employee approving the measuring device, and the approximate date of the approval:

Name	Title	Approximate date

f. Is the water user required to report the water use to the Department?      YES   NO

g. Have the reports been submitted?      YES      NO

If the reports have not been submitted, attach a copy of the reports if available.

**6. Fish Screening**

a. Are any points of diversion required to be screened to prevent fish from entering the point of diversion?  
YES NO NA

**If fish screening devices were required, the COBU map must indicate their location in relation to the point of diversion.**

**\*\*If "NO" or "NA", items b through j relating to this section can be deleted**

b. Has the fish screening been installed? YES NO

c. When was the fish screening installed?

Date	By whom

d. Is the **total** diversion rate of all rights at the point of diversion less than 0.5 cfs? YES NO

e. If the total diversion rate is less than 0.5 cfs, has the water user self certified the fish screen. YES NO

f. Has a self certification form been previously submitted to the Department? YES NO

g. If not, is the self certification form attached to this Claim? YES NO

h. If the total diversion rate is greater than 0.5 cfs, has ODFW approved the screening? YES NO

i. Has the water user previously submitted a letter from ODFW approving the screening? YES NO

j. If not, is the approval letter attached to the Claim? YES NO

**7. By-pass Devices**

a. Are any points of diversion required to have a by-pass device to prevent fish from entering the point of diversion? YES NO NA

**If by-pass devices were required, the COBU map must indicate their location in relation to the point of diversion.**

**\*\*If "NO" or "NA", items b through d relating to this section can be deleted**

b. Has the by-pass device been installed? YES NO

c. Describe the by-pass device:

When installed	By whom

**By-Pass Devices must be either approved by ODFW, or ODFW must make a determination that the device is not required.**

d. Has ODFW either approved the by-pass device or determined that the device is not required? YES NO

**\*\*A letter from ODFW either approving or waiving the by-pass device must be included with this Claim.\*\***

8. **Other Permit Conditions** (examples: special well construct standards, water conservation plans, no obstructions to fish without a fishway, etc.; number as appropriate.)

a. Did the permit or transfer final order contain any other condition?      YES    NO

If “YES”, identify the condition and describe the water users actions to comply with the condition(s):

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#### IV. Variations, Attachments, Conclusions, Map and Signatures

##### Variations

Include a description of variations from the permit or transfer final order:

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##### Attachments

If you are attaching any documents to this report, provide a list below:

Attachment name	Description

##### Permit and Transfer Final Order Rates and System Rates Comparisons:

POD or POA name or #	Maximum rate allowed by permit or transfer final order	Calculated theoretical rate of water based on system	Actual amount of water measured (if measured)	Developed use	# of acres allowed by permit or transfer final order	# of acres developed



## SPRINKLER CAPACITIES BY NOZZLE SIZE IN GALLONS PER MINUTE

This chart is comprised of information gathered from a number of sources and may differ slightly from the manufacturer's specifications.

("\*" designates computed capacity)

\*\*This page can be deleted

		P.S.I.																	
		5	10	15	20	25	30	35	40	45	50	55	60	65	70	75	80	85	90
NOZZLE SIZE	3/32				1.1	1.3	1.4	1.5	1.6	1.7	1.8								
	7/64				1.5	1.7	1.9	2	2.2										
	1/8				1.9	2.2	2.4	2.7	2.9	3	3.2								
	9/64				2.3	2.6	2.9	3.1	3.4	3.7	4								
	5/32				3	3.4	3.8	4.1	4.4	4.7	5								
	11/64	1.9	2.7	3.3	3.7	4.2	4.6	5	5.4	5.7	6	6.3	6.6						
	3/16	2.2	3.2	3.9	4.3	5	5.5	6	6.4	6.8	7.2	7.5	7.8						
	13/64	2.9	3.6	4.5	5.1	5.9	6.5	7.1	7.6	8.1	8.5	8.9	9.2						
	7/32		4.1	5.1	5.8	6.8	7.6	8.3	8.9	9.4	9.9	10.3	10.6						
	15/64							8.8		10		11.2		12.4					
	1/4		5.2	6.4	7.4	8.9	9.8	10.6	11.4	12.1	12.8	13.4	13.9	14.8*	15.3*	15.9*	16.4*	16.9*	17.4*
	17/64								12.5		14		15.6		17.1				
	9/32					11.2	12.3	13.3	14.3	15.2	16	16.8	17.5	18.1	18.9	19.7	20.7*	21.4*	22*
	19/64									16.6		18.3		19.9		21.4			
	5/16					13.1	15.2	16.5	17.7	18.9	20	21	22	23	23.9	24.8	25.7	26.4*	27.1*
	21/64										20.8		22.7		24.6		26.4		
	11/32					16.5	18	19.7	21.1	22.5	23.8	25	26.2	27.4	28.5	29.6	30.6	31.9*	32.8*
	23/64										24.5		26.8		29.1		31.4		
	3/8					19	21	22.8	24.4	26	27.5	29.1	30.6	32	33.2	34.5	35.7	38*	39*
	13/32								29*	30.9*	32.7*	34.5*	36.2*	37.4*	38.9*	40.4*	41.9*	43.3*	44.7*
7/16								33.5*	35.6*	37.7*	39.7*	41.7*	43.6*	45.3*	46.9*	48.4*	50.1*	51.6*	
1/2								42.5*	45.2*	47.7*	50.2*	52.5*	54.7*	56.8*	58.6*	60.6*	63.6*	66.7*	